

SESSION OF 2023

SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2034

As Recommended by House Committee on
Child Welfare and Foster Care

Brief*

HB 2034 would create in the Revised Kansas Code for Care of Children (Code) a program within the Kansas Department of Health and Environment (KDHE) for the training of and payment for Child Abuse Review and Evaluation (CARE) providers who conduct CARE exams. The bill would establish definitions, requirements, and procedures related to CARE examinations and CARE providers and create the CARE Fund.

The bill also would make technical amendments.

Definitions (Section 2)

The bill would add the following definitions to the Code:

- “Child abuse medical resource center” would mean a medical institution affiliated with an accredited children’s hospital or a recognized institution of higher education that has an accredited medical school program with board-certified child abuse pediatricians who provide training, support, mentoring, and peer review to CARE providers on CARE exams;
- “Child abuse review and evaluation exam” or “CARE exam” would mean a forensic medical

*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <http://www.kslegislature.org>

evaluation of a child alleged to be a victim of abuse or neglect conducted by a CARE provider;

- “Child abuse review and evaluation network” or “CARE network” would mean a network of CARE providers, child abuse medical resource centers, and any medical provider associated with a child advocacy center that has the ability to conduct a CARE exam, that collaborate to improve services provided to a child alleged to be a victim of abuse or neglect;
- “Child abuse review and evaluation provider” or “CARE provider” would mean a person licensed to practice medicine and surgery, advanced practice registered nurse, or licensed physician assistant who performs CARE exams of and provides medical diagnosis and treatment to a child alleged to be a victim of abuse or neglect and who receives:
 - Kansas-based initial intensive training regarding child maltreatment from the CARE network;
 - Continuous trainings on child maltreatment from the CARE network; and
 - Peer review and new provider mentoring regarding medical evaluations from a child abuse medical resource center; and
- “Child abuse review and evaluation referral” or “CARE referral” would mean a brief written review of allegations of physical abuse, emotional abuse, medical neglect, or physical neglect submitted by the Secretary for Children and Families or law enforcement agency to a child abuse medical resource center for a recommendation of such child’s need for medical care that may include a CARE exam.

CARE Referrals (Section 3)

Continuing law in the Code requires, as part of any investigation of reports of child abuse or neglect, the Secretary for Children and Families or the investigating law enforcement agency to visually observe the child who is the alleged victim of abuse or neglect.

The bill would amend the Code to require the Secretary for Children and Families or a law enforcement agency, upon assignment by the Secretary of any investigation of physical abuse or physical neglect, pursuant to this provision, that concerns a child five years of age or younger, to make a CARE referral for such child. The bill would allow, in any other investigation of physical abuse, emotional abuse, medical neglect, or physical neglect conducted pursuant to the section, the Secretary, the law enforcement agency, or the agency's designee to make a CARE referral for such child.

CARE Exams (Section 1)

The bill would require a CARE provider, when a CARE referral by a child abuse medical resource center recommends a CARE exam be conducted by such CARE provider during an investigation of child abuse or neglect, to report a determination in a completed review that a child has been subject to physical abuse, emotional abuse, medical neglect, or physical neglect to the Secretary for Children and Families, the local law enforcement agency, or the agency's designee, if such a determination is made. The bill would require the Secretary, upon receipt of such review, to consider and include the review in making recommendations regarding the care, safety, and placement of the child and maintain the review in the case record.

The bill would provide such review to be confidential and not be disclosed, with certain exceptions outlined in the bill and in continuing law.

The bill would specify that in order to provide forensic evaluation services to a child alleged to be a victim of physical abuse, emotional abuse, medical neglect, or physical neglect in investigations that include a CARE exam:

- Child abuse medical resource centers be allowed to collaborate directly or through technology with CARE providers to provide forensic medical evaluations, medical training, support, mentoring, and peer review to enhance the skill and role of child abuse medical resource centers and the CARE providers in a multidisciplinary context;
- CARE providers and child abuse medical resource centers be required to provide and receive specialized training for medical evaluations conducted in a hospital or child advocacy center, or by a private health care professional without the need for an agreement between such center and provider; and
- The CARE network be required to develop recommendations concerning the medical-based screening process and forensic evidence collection for a child and provide such recommendations to CARE providers, child advocacy centers, hospitals, and licensed practitioners.

Responsibilities of the Secretary of Health and Environment (Section 1)

The bill would require the Secretary of Health and Environment to implement and administer training for CARE providers to establish and maintain compliance with the requirements of the Code and assist in the implementation of the bill's provisions.

The bill would require the Secretary of Health and Environment to pay for and manage a network referral

system and to adopt rules and regulations as necessary, subject to available appropriations. A CARE provider would be required to submit all charges for payment of reviews and CARE exams to the Secretary within 90 days of performing a CARE review or exam. The Secretary would be required to pay all charges directly to a CARE provider within 30 days after being submitted. The bill would specify such payment amount to be only for the exam at the rate of a reasonable cost for providing such exam, excluding treatment that may be required due to the diagnosis, or any facility fees, supplies, or laboratory or radiology testing.

CARE Fund (Section 1)

The bill would establish in the State Treasury the Child Abuse Review and Evaluation Fund (Fund), to be administered by the Secretary of Health and Environment. The bill would require all expenditures from the Fund to be for payments of CARE exams, training of CARE providers, and the implementation and administration of the CARE program, as described above. The bill would require all expenditures from the Fund to be made in accordance with appropriation acts upon warrants of the Director of Accounts and Reports issued pursuant to vouchers approved by the Secretary or the Secretary's designee. The bill would require all moneys received for CARE exams and CARE provider training to be remitted to the State Treasurer and require the State Treasurer to deposit the entire amount in the State Treasury to the credit of the Fund.

Background

The bill was introduced by the House Committee on Child Welfare and Foster Care at the request of a representative of the Kansas Chapter of the American Academy of Pediatrics (KAAP).

[*Note:* A similar bill, HB 2632, was introduced in 2022 by the House Committee on Children and Seniors at the request of KAAP. The bill passed the House, as amended by the House Committee of the Whole, but died in the Senate Committee on Public Health and Welfare. However, a proviso was included in Section 24 of 2022 HB 2510 (the Appropriations Bill for FY 2022, FY 2023, and FY 2024) that required expenditures to be made in FY 2023 from the CARE program account to train healthcare providers to recognize signs of child abuse and reimburse reviews and examinations conducted by such trained healthcare providers. The proviso also required KDHE, on or before January 9, 2023, to submit a report to the House Committee on Appropriations and the Senate Committee on Ways and Means on services provided and the location of services provided by the program.]

House Committee on Child Welfare and Foster Care

In the House Committee hearing, two representatives of KAAP provided **proponent** testimony, stating KDHE, the Department for Children and Families (DCF), and KAAP have been collaborating on the coordination of the CARE program since July 2022 to help assure that every potential case of child maltreatment is thoroughly investigated. The representatives stated the 2022 Legislature enacted a proviso to help provide a foundation for the CARE provider network, but enactment of this bill is needed to sustain the program and for the network to reach its full potential to serve Kansas children and save young lives. The KAAP representatives reported on the accomplishments of the CARE program since July 1, 2022, including the creation of the CARE network with an increased number of CARE providers throughout the state, a statewide referral system, and a payment system for CARE exams.

Written-only proponent testimony was provided by representatives of Children's Alliance of Kansas, DCF, and KDHE, and a representative of the Kansas Association of

Chiefs of Police, Kansas Sheriffs Association, and Kansas Peace Officers Association.

No other testimony was provided.

Fiscal Information

According to the fiscal note prepared by the Division of the Budget on the bill, KDHE estimates current program expenditures of \$757,000 in FY 2023 and \$758,317 in FY 2024, all from the State General Fund (SGF), which is fully funded in the Governor's recommended budget. KDHE notes enactment of the bill would not generate additional expenditures in either fiscal year but would require the addition of 2.0 FTE positions. These positions are funded, but the agency's position count was not increased when the program was funded. KDHE estimates ongoing cost would be determined by the number of providers that need training and certification and also continuing education. Reimbursements would fluctuate based on the number of child abuse cases in which a CARE exam would be needed. KDHE notes the bill does not specify the revenue source for the CARE Fund, and the total revenue could not be estimated. Once an alternative revenue source is identified, the SGF appropriation could be reduced or eliminated based on program revenue and expenditure estimates.

Although provisions of the bill would be added to the Revised Kansas Code for the Care of Children, DCF reports there would be no fiscal effect on agency operations, and all costs for the program would be in KDHE.

Expenditures for the current program in operation at KDHE are reflected in the agency's budget in *The FY 2024 Governor's Budget Report*; however, the 2.0 FTE positions cited as needed by KDHE are not reflected in *The FY 2024 Governor's Budget Report*.

Child abuse and neglect; child abuse investigation; Revised Kansas Code for the Care of Children; child abuse review and evaluation